FORM D



TATES
HANGE COMMISSION

wasnington, D.C. 20549

OMB APPROVAL

1346138

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FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Serial							
L							
/ED							

		_			
Name of Offering: PWB VALUE PARTI	NERS XV, L.P Of	fering of Limited	Partnership II	nterests	
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	☐ Section 4(6)	☐ ULOE
Type of Filing:	☐ New Filing	Amendment			
	A. B	ASIC IDENTIFICA	ATION DATA		
1. Enter the information requested about the	issuer				
Name of Issuer (☐ check if this is an a	imendment and name ha	is changed, and indic	ate change.)		
PWB VALUE PARTNERS XV, L.P.					
Address of Executive Offices	(Number	and Street, City, Sta	te, Zip Code)	Telephone Number (Inch	uding Area Code)
7025 North Scottsdale Road, Suite 230, Scot	tsdale, Arizona 85253			(480) 368-1513	
Address of Principal Business Operations	(Number	and Street, City, Sta-	te, Zip Code)	Telephone Number (Incli	uding Area Code)
(if different from Executive Offices)					
Brief Description of Business: To operate	as a private investi	nent limited part	<u>nership</u>		
Type of Business Organization					PHOUESSE
☐ corporation	limited partner	ship, already formed		ther (please specify):	MAY 2 2 2007
1	•				MALEZZUUL
☐ business trust	limited partner	ship, to be formed			THOMSON
Actual or Estimated Date of Incorporation or	Organization:	Mont 1	h Yea	5 🗷 Actual	FINANCIAL Estimated
Jurisdiction of Incorporation: (Enter two-lett	er IIS Postal Service A	hbreviation for State			
•	ada; FN for other foreig		•		
1	•	•		D	E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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2. Enter the info	remotion requested for the f		IFICATION DATA		.
	ormation requested for the f	-	and five veges		
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	= '	orporate issuers and of corporate			
i	and managing partner of p		general and managing partners	s or partite ship issu	cis, and
Check Box(es) that App		Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or
Check Box(es) that App	y. Fromoter	Deliciticiai Owliei	Executive Officer	Director	Managing Partner
Full Name (Last name fi	rst, if individual)				
LLA, LLC (the "GI	" or "General Partner	.")			
Business or Residence A	ddress (Number and Stre	et, City, State, Zip Code)			
7025 North Scottsdale P	oad, Suite 230, Scottsdale,	Arizona 85753			
Check Box(es) that App		Beneficial Owner	☐ Executive Officer	Director	☐ General and/or
Check Box(es) man App	y. 🖭 Fromotei	E Bellettelat Owner	Lxccutive Officer	□ Director	Managing Partner
Full Name (Last name fi	rst. if individual)				
	,				
BLAVIN, PAUL W.					
Business or Residence A	ddress (Number and Stre	et, City, State, Zip Code)			
7025 North Scottsdale R	oad, Suite 230, Scottsdale,	Arizona 85253			
Check Box(cs) that App	y: E Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
					Managing Partner
Full Name (Last name fi	rst, if individual)				
SPALTER, MICHAEL	Н.				
	ddress (Number and Stre	et, City, State, Zip Code)			
99 Williams Street Prov	idence, Rhode Island 0290	36			
Check Box(es) that App		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Clicck Box(23) that App	ly. D Homotes	Delicitorial Office	Excentive Officer	□ Birector	Managing Partner
Full Name (Last name fi	rst, if individual)				
,	,				
Business or Residence A	ddiess (Number and Stre	et, City, State, Zip Code)			
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Check Box(es) that App	ly: 🗖 Promoter	□ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
					Managing Partner
Full Name (Last name fi	rst, if individual)			•	
Business or Residence A	ddress (Number and Stre	et, City, State, Zip Code)			
1	·				
Check Box(es) that App	lv: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Check Box(es) that App	iy. 🗀 Flomotei	- Belieficial Owner	L'Accunive Officer	Director	Managing Partner
Full Name (Last name fi	rst, if individual)				
	,				
					
Business or Residence A	ddress (Number and Stre	et, City, State, Zip Code)			

Check Box(es) that App	ly: Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
					Managing Partner
Full Name (Last name fi	rst, if individual)				
Business or Residence A	deress (Number and Stre	et, City, State, Zip Code)			
1					

	1 1				B. I.	NFORMA	ATION A	BOUT O	FERING					
				-									Yes	No
1.	Has the issue	sold, or do	es the issue	r intend to					_					X
า	What is the m	ladan saa lees	lastmant th	nt suill ba -				umn 2, if fi					\$5,000.	000 *
2.	what is the m	munum M	resument th	at WIII DE 8	ocepted from	nt any mon	/ iuuäi /		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************	***************************************		\$ <u>5,000.</u> Yes	No
*(01	any lesser	amount a	it the sole	discretion	on of the	Investme	nt Manas	ger and th	ne Genero	al Partne	r)			
3.	Does the offer				•		•	•			•		X	
4.	Enter the info													neration for
	solicitation of registered with a broker or de	f purchasers h the SEC a	s in connec and/or with	tion with s a state or s	ales of sec tates, list th	urities in the ne name of	he offering the broker	. If a perso or dealer. I	on to be lis	ted is an as	sociated p	erson or ag	ent of a broke	er or dealer
Full	Name (Last na	me first, if	individual)	•										
NON	 E													
	ness or Resider	nce Address	s (Number a	and Street,	City, State,	Zip Code)								
Nam	e of Associated	Broker or	Dealer										·	
State	s in Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solici	t Purchasen	s		- 					
	(Check: "All S	tates" or ch	eck individ	lual States)		•••••					•••••	••••	🗖 All S	tates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
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	[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full 1	Name (Last na	me first, if	individual)											
Busi	hess or Resider	nce Addres:	s (Numbe	r and Street	t, City, Stat	e, Zip Code	:)							
														
Nam	e of Associated	d Broker or	Dealer											
State	s in Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solici	t Purchasen	S							
	(Chec's "All S												🗖 All S	tates
	AL] IL]	[AK] [IN]	[AZ] [lA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	(CT) [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
E11 1	RI] Name (Last na	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
ruii .	Name (Last na	me mist, n	individuai)											
Ruci	ness or Resider	nce Address	s (Numbe	r and Street	City Stat	e Zin Code	٠١	··	····					
ะนวเ	ness or reside	nee Audies	שלוווטרי, כ	. wio 3000	i, City, Stat	c, zip code	•)							
Nam	e of Associated	Broker or	Dealer	•										
														
State	s in Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solici	Purchaser	<u> </u>							
1	(Check "All S												🗖 All S	tates
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
i	(MT) [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	(OK) (WI)	[OR] [WY]	[PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	indicate in the columns below the amounts of securities offered for exchange and already exchanged. Type of Security	Aggregate	Amount Already
		Offering Price (1)	Sold (2)
	Debt	\$	\$
	Equity	s	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$500,000,000	\$ <u>24,250,000</u>
	Other (specify)	\$	\$
	Total	\$ <u>500,000,000</u>	\$24,250,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number investors (2)	Aggregate Dollar Amoun of Purchases (2
	Accredited Investors	8	\$24,250,000
	Non-accredited Investors		\$0
	Total (for filings under Rule 504 only)	N/A	\$N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amoun Sold
	Rule 505	N/A	\$N/A
	Regulation A	N/A	\$ N/A
	Rule 504	N/A	\$ <u>N/A</u> \$ <u>N/A</u>
<u> </u>	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ <u>-0-</u>
1	Printing and Engraving Costs		\$ -0-
	Legal Fees	X	\$ <u>40,000</u>
!	Accounting Fees		\$ <u>-0-</u>
	Engineering Fees		\$ <u>-0-</u>
	Sales Commissions (specify finders' fees separately)		\$ -0-
	Other Expenses (identify)		\$ -0-
1			

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	NSES AND USE OF PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C - total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted to the issuer."	l gross proceeds	0,000
•	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be the purposes shown. If the amount for any purpose is not known, furnish an estimate and checkeft of the estimate. The total of the payments listed must equal the adjusted gross proceeds forth in response to Part C - Question 4.b above.	ck the box to the	
	1 	Payments to Officers, Directors, and Affiliates	Payments to Others
	Salaries and fees.	X \$ (4)	" \$
	Purchases of real estate	□ \$	□ \$
į	Purchase, rental or leasing and installation of machinery and equipment	\$	□ \$
	Construction or leasing of plant buildings and facilities	□ \$	□ \$
ļ	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		□ \$
İ	Repayment of indebtedness		□ \$
, ,	Working capital	\$	□ \$
1	Other (specify): <u>Fund investments</u>	□ \$	■ \$ <u>499,960,000</u>
į	Column Totals	× \$ (4)	▲ \$499,960,000
	Total Payments Listed (column totals added)	<u>\\$_4</u>	99,960,000
-	D. FEDERAL SIGNATURE	2	
an un non-a	ssuer has duly caused this notice to be signed by the undersigned duly authorized person. If thi dertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon writte accredited investor pursuant to paragraph (b)(2) of Rule 502. r (Print or Type) Signature	s notice is filed under Rule 505, the following request of its staff, the information fu	owing signature constitutes mished by the issuer to any
	B VALUE PARTNERS XV, L.P. e of Signer (Print or Type) Title of Signer (Print or Type)	to 16	12007
Name	e of Signer (Print or Type) Title of Signer (Print or Type)		
BY:	MICHAEL H. SPALTER MEMBER OF LLA, LLC		
	(4) The Investment Manager and affiliates of the Issuer will be entitled rate more fully described in the Issuer's confidential offering materials.	to receive investment managem	ent compensation at a
	ATTENTION		 -
	ATTENTION Intentional misstatements or omissions of fact constitute federal	criminal violations. (See 18 U.	S.C. 1001.)

,	<u> </u>	TO STATE OF CALLEY OF COLUMN ASSESSMENT OF CALLEY OF CAL		
	3	E. STATE SIGNATURE	Yes	No
1.	Is any party described in 17 CFR 230.262 p	oresently subject to any of the disqualification provisions of such rule?		
		See Appendix, Column 5, for state response. NOT APPLICABLE		
2.	The undersigned issuer hereby undertakes such times as required by state law.	to furnish to any state administrator of any state in which this notice is filed, a notice on Form	D (17 CFR	239.500) at
3.	The undersigned issuer hereby undertakes t	o furnish to the state administrators, upon written request, information furnished by the issuer t	o offerees.	
4.	(ULOE) of the state in which this notice i	issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limits filed and understands that the issuer claiming the availability of this exemption has the but ROT APPLICABLE		
The i	II	he contents to be true and has duly caused this notice to be signed on its behalf by the undersign	ned duly au	thorized
lssuc	r (Print or Type)	Signature Date		
PW	B VALUE PARTNERS XV, L.P.	buchell bushing	v 7	
		Title (Print or Type)		
BY:	MICHAEL H. SPALTER	MEMBER OF LLA, LLC		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

-	j i				APPENDIX	****			
1		2	3			4			5 ification
	to non-a	in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	\$500,000,000 aggregate amount of Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	<u></u>								<u> </u>
AK	 	·							
AZ									
AR									
CA	<u> </u>								
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DE									<u> </u>
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IA	<u> </u>								
KS	-			<u> </u>					
KY	-								
LA	 				ļ				
ME									
MD	-								
MA			San Abassa	-	C10 350 000	NIA	NIA	N/A	N/A
MN	 	X	See Above	7	\$19,250,000	N/A	N/A	N/A	N/A
MN MS									
MO								<u> </u>	
MT									
NE NE									
NV									

					APPENDIX						
1	_ `	2	3			4			5		
	to non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	\$500,000,000 aggregate amount of Limited Partnership Interests	Number of Accredited Investors	Accredited Non-Accredited						
NH											
ΝJ											
NM											
NY											
NC											
ND	<u> </u>								<u></u>		
ОН	<u> </u>										
OK	<u> </u>						ļ	,			
OR	<u> </u>								ļ		
PA	<u> </u>							·	<u> </u>		
RI	<u> </u>	<u>x</u>	See Above	1	\$5,000,000	N/A	N/A	N/A	N/A		
SC	<u> </u>										
SD	<u> </u>										
TN	<u> </u>						-				
TX	<u> </u>	-					7				
UT	<u> </u>	<u> </u>							<u></u>		
VT	<u> </u>										
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